STATEMENT UNDER 37 CFR 3.73	3 <u>(b)</u>
Applicant/Patent Owner: Guido Grandi and Giulio Ratti	
Application No./Patent No.: 10/591,395 Filed/Issue Date: At	Jaust 22, 2007
Entitled: IMMUNOGENIC COMPOSITIONS FOR CHLAMYDIA PNEUMON	IAE
Novartis Vaccines and Diagnostics, SRL a comporation (Name of Assignee) (Type of Assignee, e.g., corporation)	tion, partnership, university, government agency, etc.)
states that it is:  1.  the assignee of the entire right, title, and interest; or	
an assignee of less than the entire right, title and interest. The extent (by, percentage) of its ownership interest is%	
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A.      An assignment from the inventor(s) of the patent application/patent identified on June 10, 2008 in the United States Patent and Trademark Office at Recopy thereof is attached.      B.      A chain of title from the inventor(s), of the patent application/patent identified below:	el 021077, Frame 0272, or for which a
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Additional documents in the chain of title are listed on a supplemental	sheet.
Copies of assignments or other documents in the chain of title are attached.  [NOTE: A separate copy (i.e., a true copy of the original assignment documen  Division in accordance with 37 CFR Part 3, if the assignment is to be record  MPEP 302.8]	ut(s)) must be submitted to Assignment ded in the records of the USPTO. <u>See</u>
The undersigned (whose title is supplied below) is authorized to act on behalf of th	ne assignee.
127~	11 De comber 2008
Signature	11 De Conder 2008 Date 510 923 2192
Helen Lee	510 923 2192
Printed or Typed Name	Telephone Number
Attorney-in-Fact, Novartis Vaccines and Diagnostics, SRL	
Title	

070.000.00

## POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

	P10/S8/81 (04-05
Application Number	10/591,395
Filling Date	August 22, 2007
First Named Inventor	GRANDI et al.
Title	IMMUNOGENIC COMPOSITIONS FOR CHLAMYDIA PNEUMONIAE
Art Unit	1645
Examiner Name	P. Baskar
Attorney Docket Number	PP021431.0005

I hereby revoke all previous powers of attorney given in the above-identified application.						
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Practitioner(s) named below:						
	Name			Registration Number		
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as my/our attorney(s) or agent(s) to prosecute the application Identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.						
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I am the:						
Applicant/Inventor,						
Assignee of record of the entire Interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
SIGNATURE of Applicant or Assignee of Record						
Signature	1-12-		***************************************	Date	mber 2018	$\exists$
Name	Helen Lee			Telephone 510 9.	73 2/52	_
itle and Company Attorney-in-Fact, Novartls Vaccines and Diagnostics, SRL						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
*Total offorms are submitted.						